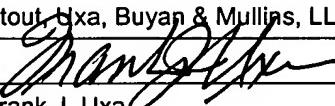


TRANSMITTAL FORM <small>JUN 27 2006 (to be used for all correspondence after initial filing)</small>		Application Number	10/624,915	
		Filing Date	July 22, 2003	
		First Named Inventor	PFLUEGER	
		Group Art Unit	3743	
		Examiner Name	Patel, N.	
Number of Pages in This Submission			Attorney Docket Number	D-3077

YRW \$

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <small>(in duplicate)</small> <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <small>Change of Correspondence Address</small> <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <small>(Appeal Notice, Brief, Reply Brief)</small> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <small>(please identify below)</small>
		Formal Drawings, Annotated Drawing Sheet showing correction and Exhibit 1
		Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Stout, Uxa, Buyan & Mullins, LLP		
Signature			
Printed Name	Frank J. Uxa		
Date	6/23/06	Reg. No.	25,612

CERTIFICATE OF TRANSMISSION/MAILING

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Signature		
Typed or printed name	Alicia Curran	Date
		6/23/06

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FEE TRANSMITTAL

for FY 2005

Patent fees are subject to annual revision. JUN 27 2004

Complete if Known

Application Number	10/624,915
Filing Date	July 22, 2003
First Named Inventor	PFLUEGER
Examiner Name	Patel, N.
<input checked="" type="checkbox"/> Application claims small entity status. See 37 CFR 1.27	AS Unit
TOTAL AMOUNT OF PAYMENT	(\\$) 60.00
Attorney Docket No.	D-3077

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number 21-0890 Deposit Account Name Frank J. Uxa

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) associated with this communication Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
							<u>Subtotal (1)</u> <u>0</u>

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple Dependent Claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>		
	-20 or HP =	x				
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
-3 or HP =	x					

HP = highest number of total claims paid for, if greater than 20

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

-3 or HP = Extra Claims Fee (\$) Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3

Subtotal (2) 0

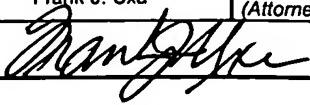
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
	-100 =	/50=		
		(round up to a whole number)		<u>Subtotal (3)</u> <u>0</u>

4. OTHER FEE(S)

- Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)
- Non-English Specification: \$130 fee (no small entity discount)
- 1-month extension of time: \$120 fee (\$60 small entity discount)
- 2-month extension of time: \$450 fee (\$225 small entity discount)
- 3-month extension of time: \$1020 fee (\$510 small entity discount)
- 4-month extension of time: \$1590 fee (\$795 small entity discount)
- 5-month extension of time: \$2160 fee (\$1080 small entity discount)
- Information Disclosure Statement Fee: \$180 fee (no small entity discount)
- Notice of Appeal: \$500 fee (\$250 small entity discount)
- Filing a Brief in Support of Appeal: \$500 fee (\$250 small entity discount)
- Request for Oral Hearing: \$1000 fee (\$500 small entity discount)
- Utility Issue Fee: \$1400 fee (\$700 small entity discount)
- Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount)
- Request for Continued Examination: \$790 fee (\$395 small entity discount)
- Other: _____

Subtotal (4) 60

SUBMITTED BY

<u>Name (Print/Type)</u>	Frank J. Uxa	<u>Registration No. (Attorney/Agent)</u>	25,612	<u>Telephone</u>	949-450-1750
<u>Signature</u>				<u>Date</u>	6/23/06